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SERIAL NUMBER 10/709,365	FILING OR 371(c) DATE 04/29/2004 RULE	CLASS 600	GROUP ART UNIT 3768	ATTORNEY DOCKET NO. 145542NM (GEMS0241PA)
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/24/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	NY	3	23	3
Verified and Acknowledged	<i>Elmer L. West</i> <i>El</i> Examiner's Signature Initials				

ADDRESS

61604

TITLE

MAGNETIC RESONANCE IMAGING WITH IMPROVED DIFFERENTIATION OF INFARCTED TISSUE

FILING FEE RECEIVED 824	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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